

Patient Welcome Packet



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Hello & Welcome!

Dear Patient:

Welcome to Rx To Go, the in-house medically-integrated dispensing pharmacy for Florida Cancer Specialists & Research Institute (FCS). We appreciate the opportunity to serve you for all of your oral oncology and/or hematology needs. Our goal is to provide you with exceptional customer service and care, based on your specific treatment plan. We will work collaboratively with you and your doctor's office to ensure you have continued access to your specialty medication.

Today you have received your first shipment of medication to start your therapy. Enclosed you will find your medication, along with dosage instructions, drug information and your receipt.

Please take a few moments to review the information in this welcome packet. It will help explain the services we provide and answer some of the most common questions you may have. If we can assist you with any questions about our services, please contact us at (866) 979-8646.

We look forward to working with you.

Sincerely,
Rx To Go Pharmacy Team

Mission Statement

The Rx To Go pharmacy approach supports patient access to high cost oral chemotherapy drugs. Rx To Go, LLC engages patients, caregivers, nurses and FCS Prescribers to improve patient outcomes for chemotherapy treatments.



Rx To Go is Your Treatment Partner

Rx To Go works exclusively with FCS providers and patients. As a specialty pharmacy, we are different from traditional pharmacies because we can coordinate many aspects of patient care and disease management.

Rx To Go provides convenient dispensing and delivery of specialty medications to FCS patients. Under the supervision of our qualified pharmacist team and trained staff, we assist our patients to achieve optimal clinical outcomes while effectively managing the cost of therapies.

Here is an overview of the many benefits our specialty pharmacy provides to FCS patients: *(Be sure to review your FCS new patient paperwork for complete details.)*

Coordination with Your Doctor

We will always keep the lines of communication open between you, your caregiver, and your doctor. We are here to make sure that any difficulties you may be having with your treatment are addressed immediately.

Clinical Lab Value Monitoring

Due to the complex nature of many specialty therapies and the need to make sure that the therapy is as effective as possible, we may need to coordinate regular reviews of your lab tests with your doctor. These may require a visit to your doctor to make sure that your therapy is progressing as expected. Please be aware that Rx To Go uses this information for internal monitoring only. Notice of Privacy Practice located on the FCS website at:

FLCancer.com/Privacy-Policy.

Therapy Support & Adherence Monitoring

The most expensive medication is the one that is not taken! It is vital that you take your medications as instructed by your pharmacists and as detailed on your pharmacy label. Rx To Go staff members will help to explain your medications and their use with your specific disease state. We encourage all patients to become empowered decision makers. We are happy to provide you with information about advocacy groups and recommendations of other helpful resources, just give us a call!

HOW WE WORK FOR YOU

OUR PHARMACY WORKFLOW

Intake

We receive a new prescription for you into our system. We will verify your pharmacy insurance benefits and contact you if there are any concerns.

Prior Authorization

Optional Step: A requirement from the insurance company requiring documentation to determine if the medication will be covered under the insurance plan. The expected timeframe takes 2–3 business days.

Patient Assistance

Optional Step: If you cannot afford your copay, our team will look into potential assistance options through a foundation or manufacturer. This can take up to 30 days due to paperwork processing.

Insurance Billing

Our team will bill your insurance and/or copay card or the foundation/manufacturer providing assistance.

Pharmacist

Our team will check the prescription and review your FCS medical chart. If questions arise regarding the prescription, our team will communicate with the physician's office for clarification.

Adherence

We will confirm the correct dosage of your medication, your copay amount and schedule a delivery date.

Dispensing

Our team will provide educational material (if available), fill the prescription, package it for you and prepare for FedEx delivery. Most deliveries are next-day to your home or preferred delivery location.

Initial Counseling

A trained Clinical Pharmacist will contact you regarding your medication. They will discuss information about the medication and answer questions you may have.

Insurance Coverage & Billing, Medication Cost & Financial Assistance

Before your care begins, an Rx To Go staff member will work with your physician and your insurance company to confirm your coverage and assist with the prior authorization process. This may take a few business days to complete. We will contact you by phone to inform you about your out-of-pocket medication costs that are not covered by your insurance, such as deductibles, copays, co-insurances or plan changes.

Rx To Go will bill your health insurance company for the cost of your medication. If the claim is rejected, we will notify you so that we can work together to resolve the issue. If your insurance provider denies coverage or if you disagree with the benefits coverage, you may have the right to file an appeal with your health plan. We will assist you in the appeal process and provide any documentation you may need.

Rx To Go will update you regarding your insurance network status. If Rx To Go is an out-of-network provider with your insurance plan, we will find the most cost-effective way for you to receive your medication. In some cases, we may refer your prescription(s) to the insurance provider or to their in-network pharmacy. We will call you to provide you an update regarding your medication status and ensure the correct in-network pharmacy receives your prescription.

Copayments

In most cases, Rx To Go is required to collect copayments prior to shipping your medication. Copayments can be paid by credit card (Visa, Mastercard, American Express or Discover), electronic checking account debit (over the phone) or by check or money order (through the U.S. mail).

Financial Assistance

We know that treatment can be costly. We are here to help you. We will automatically seek out less expensive generic substitutions for your prescribed medications if your doctor allows for it. Ask us anytime if a lower cost generic drug is available.

If you do not have prescription drug coverage or if you cannot afford your copay amount, our team will help to make sure you receive the medications you need to avoid interruptions in your care. We work directly with several foundations and drug company programs that provide financial assistance.

Medication Refills

Due to the cost of specialty medications and frequent therapy adjustments we do not automatically fill any prescriptions without your permission. An Rx To Go staff member will call you five to seven days before your refill due date to coordinate the refill and shipment of your medications. With each fill, we will need to confirm and update your insurance information and select a delivery date for your medication.

We will ship your prescription to your home, workplace or another location at no cost to you. Shipments are sent via FedEx anywhere in Florida. If you will be traveling, please let us know, as we are licensed to ship to most states throughout the United States.

If your doctor prescribes a new medication or a medication change, we will contact you immediately to coordinate accurate, safe and timely delivery.

It is vital that oral medications are delivered to you on a timely schedule and that you are closely monitored to ensure you are taking them correctly and on time. When you talk with our experienced Rx To Go patient advocates, we will make sure you are on track with your treatment.

Patient Management Program

Through our Patient Management Program, registered pharmacists are available 24/7 for support. Speaking to one of our Rx To Go registered pharmacists offers many benefits to help maximize the effectiveness of treatment and achieve improved health. Contact us at (866) 979-8646 for assistance with:

- Managing side effects
- Making sure you are taking your medications as prescribed and on time
- Coordinating with your physician
- Review clinical lab concerns
- Accessing financial assistance to help pay for medication*

The clinical benefits of the program may be limited if a patient chooses not to actively participate or follow recommendations or does not comply with the treatment directions while on therapy. Participation is not mandatory and patients may opt out of the program at any time.

* *Financial assistance may be limited by the type of medication dispensed.*

Side Effects

You should report all side effects to a Rx To Go pharmacist immediately. Depending on the clinical consult and the medication's expected side effects, we may need to notify the FDA about the issue. Please be honest and clear when reporting your activities and medication regimens, including your use of over-the-counter and/or herbal supplements, so that Rx To Go can understand your situation in full detail.

Drug Recalls

We will contact you immediately if there is a recall of medications or supplies you received through Rx To Go. We may ask you to return or dispose of what you have on hand and we will arrange to provide an equivalent replacement, if cleared and prescribed by your doctor. Your safety is our highest priority.

Questions or Concerns?

CALL US AT (866) 979-8646

Our regular office hours are:

Monday–Friday: 9 a.m.–5 p.m., Saturday: 9 a.m.–1 p.m.

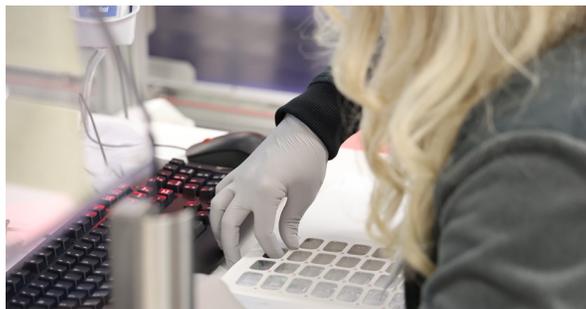
After-Hour Services

For after-hour assistance, such as running out of your medication or questions on missed doses or potential side effects, please call Rx To Go Pharmacy at **(866) 979-8646**. You will be directed to a live operator, and a pharmacist will return your call within 30 minutes, 24 hours a day, seven days a week.

We are happy to discuss your concerns and answer any questions you may have.

Collecting and Disposing of Unwanted Medications

The Environmental Protection Agency recommends the public take advantage of pharmaceutical take-back collection programs for prescriptions or over the counter drugs. These programs are a safe and environmentally-conscious way to dispose of unwanted medicines. There are many drop-off locations in your local community, such as local law enforcement agencies, retail pharmacies or health clinics.



To find a local law enforcement agency that participates in National Prescription Drug Take Back Days, visit [TakeBackDay.DEA.gov](https://www.dea.gov/takeback) or call the DEA Division Registration Call Center at (800) 882-9539.

Please be aware that after delivery of your medication, Rx To Go Pharmacy is unable to accept returns.

How to Dispose of Medications Properly

DO NOT: Flush expired or unwanted prescription and over-the-counter drugs down the toilet or drain unless the label or patient information sheet specifically instructs you to do so.

DO: Return unwanted or expired prescription and over-the-counter drugs to a Drug Take Back program or follow the steps for household disposal below.

First Choice: Drug Take Back Events

Call your city or county government for “household trash and recycling service” and ask if they have a Drug Take Back program. Some counties offer a central location for household hazardous waste collection where prescriptions and over-the-counter drugs are accepted.

Second Choice: Household Disposal Steps

(Drug Disposal Guidelines, Office of National Drug Control Policy)

1. Take your prescription drugs out of their original containers.
2. Mix the drugs with an undesirable substance such as cat litter or used coffee grounds.
3. Put the mixture into a disposable container with a lid, such as an empty margarine tub or sealable bag.
4. Conceal or remove any personal information, including Rx number, on the empty containers by covering it with duct tape or scratching it off with a permanent marker.
5. Now place the sealed container with the drug mixture and the empty drug containers in the trash.

Please contact us if:

- You have questions about when or how to take your medication.
- You are having any adverse reactions or want to consult with a pharmacist.
- You need to order supplies or medication refills.
- You have questions about your current order or experience delays with your shipment.
- You are having problems with equipment, dressings or experience a change in your condition.
- You are hospitalized, your condition worsens or your therapy is interrupted for any reason.
- There is a change in your prescription or supply needs.
- You need information about disposing medication.
- You need information about accessing medication in the event of an emergency.
- Your therapy ends.
- You start taking new medications, including over the counter or herbal supplements, etc.
- You need to provide new health plan information or have a billing question about out-of-pocket costs, deductibles, copayments or co-insurance options.
- You would like additional information on ways to access your medication, health services, payment options and coordination of therapy.
- You would like to find out about product selection and availability, including current medications that Rx To Go may not have access to.
- You have questions regarding your prescription or would like to transfer your prescription to another pharmacy.
- You would like to understand where to refill your medication if Rx To Go is limited by your benefit plan.
- You have a concern for your safety.
- You may suspect a medication issue such as counterfeit medication, errors or adverse drug events.
- Contact Rx To Go to speak with our leadership team.

Holiday Schedule

Rx To Go will be closed on the following holidays:

- New Year's Day (January 1)
- Memorial Day (last Monday in May)
- Juneteenth (June 19)
- Independence Day (July 4)
- Labor Day (First Monday in September)
- Thanksgiving Day (fourth Thursday in November)
- Christmas Day (December 25)

What You Need to Know About Oral Chemotherapy

Below is a quick reference guide regarding your oral chemotherapy. Please feel free to reach out to the pharmacy regarding your specific medication questions.

Handling Your Medication

- Wash your hands before and after touching the drug.
- It is recommended that caregivers wear gloves when handling oral chemotherapy medication.

Taking Your Medication

- Be sure that you understand when and how to take the medication and call us if there are any questions.
- Many oral medications should not be broken, cut or crushed. This can cause the medication to become less effective and potentially create inaccurate doses.
- Consider using a pill reminder alarm on your phone and/or calendar alerts to avoid missing doses.
- Do not double or skip doses unless directed by your doctor.
- If you miss a dose or vomit your medication, contact your doctor's office or the pharmacy to discuss next steps.
- Never share your medication with anyone.

Storage

- Most oral chemotherapy is stored at room temperature, in a cool dry place. You will be given directions on refrigeration requirements or other special storage.
- Keep your medication in its original container, away from excess heat, moisture and sunlight.
- Never put your medication in an unlabeled bottle or combine different medications in a single bottle.
- Keep your medication away from food preparation areas.
- Always keep your medication in a safe place that is out of the reach of children and pets.

Body Waste

- Chemotherapy stays in your body and can be found in vomit, urine, stool and sweat.
- Wash your hands well with soap and water after using the toilet.
- Caregivers should avoid contact with a patient's body wastes.
- Wear gloves to handle any items that are soiled and items will need to be washed separately from other linens and clothing.
- Pregnant caregivers should not handle patient body waste.
- If you have an ostomy, wear gloves when emptying or changing appliances.

Helpful Reminder

Save and organize all leaflets the pharmacy provides with your medication. These documents are resources for you to know when and how to take your medication, storage information and what potential side effects you may experience.

Infection Prevention

Five things you can do to prevent infection

It is important to try and avoid contagious diseases like the flu and the common cold. Follow these five easy steps to prevent the spread of infection.



1. **Clean your hands:** Clean your hands thoroughly for at least 15 seconds. Use soap and warm water (be careful of water temperature and use a temperature that is comfortable for you). Clean your hands after visiting a place of business, before handling or eating food, after visiting someone who is ill, after playing with a pet, after changing a diaper, etc.



2. **Cover your mouth and nose:** Germs can travel three feet or more when you sneeze or cough. Always cover your mouth to prevent the spread of infection. You can sneeze or cough into a tissue or at the bend of your elbow. Always make sure you clean your hands right away after sneezing or coughing.



3. **Avoid close contact with others if you are sick:** If you are sick, stay away from others (if possible) and do not touch or shake hands with people. If you are visiting the doctor for treatment, call ahead and ask if there is anything you can do to further prevent spreading an infection.



4. **Get your vaccinations:** Make sure you are up to date on your vaccinations from your healthcare provider. Vaccinations are available for: chicken pox, measles, tetanus, shingles, mumps, meningitis, hepatitis, pneumonia, coronavirus and flu (influenza).



5. **Ask your healthcare professional to wash their hands and wear gloves:** Healthcare providers come in contact with lots of bacteria and viruses. Do not be afraid to ask them if they should wear gloves or other forms of PPE (personal protective equipment) before they treat you.

Home Safety

Included are a few easy tips to make your home safe and help prevent injuries within your home.

Make your home a safer place

- Install handrails on staircases
- Pick up clothes
- Clear away loose cords
- Use non-slip mats in shower
- Add more lighting
- Declutter kitchen

Stay healthy

- Check prescriptions for side effects
- Get regular vision checks
- Exercise regularly
- Wear shoes with traction
- Eat a healthy diet

Prevent fires

- Unplug appliances when not in use
- Double check stoves and ovens after each use
- Never disable or remove batteries from a smoke alarm
- Avoid plugging multiple appliances into an extension cord
- Do not put electrical cords under a carpet as it is highly flammable
- Do not replace busted fuses with coins, pins or other metals
- Keep an eye on burning candles

Handling a power outage

- Notify your local gas or electric company of the outage
- Make sure to have a flashlight and fresh batteries available
- Keep freezers and refrigerators closed
- If you are on oxygen, make sure to turn it off before lighting any candles
- Only use generators outdoors and away from windows

Emergency preparedness

- Know your evacuation route
- Have an emergency or first aid kit available
- Keep extra water and non-perishable snacks on hand
- Have one week of medication on hand
- Maintain an up-to-date emergency contact list
- For additional information, visit redcross.com

Should you have any questions about your prescription or in the event of an emergency, do not hesitate to call your Rx To Go Pharmacy pharmacist at **(866) 979-8646**.

Patient Bill of Rights

Patients have the right to:

- Be treated as a unique individual, with dignity, courtesy and respect.
- Receive quality medications and services that meet or exceed professional and industry standards regardless of race, religion, political belief, sex, social or economic status, age or disease process.
- Be fully informed and receive written information on the scope of care and services provided by Rx To Go Pharmacy, as well as any limitations of the company's care or service capabilities.
- Receive information in a manner, format and/or language that you understand.
- Choose a healthcare provider.
- Obtain, upon request, evidence-based practice information for clinical decisions (manufacturer package inserts, published practice guidelines, peer reviewed journals, etc.), including the level of evidence or consensus describing the process for intervention.
- Receive complete verbal or written explanations of expected payments from Medicare or other third-party payers, charges for which you may be responsible and an explanation of all forms you are requested to sign in advance of services being provided.
- Be fully informed of your responsibilities.
- Be offered assistance through any eligible programs of patient management services, including manufacturer copay, patient assistance programs or foundation support.
- Receive instruction and education from qualified personnel on appropriately taking and safely handling your medications.
- Coordination and continuity of services from Rx To Go Pharmacy.
- Be advised of any change in the plan of service before the change is made.
- Be able to identify company representatives through name (name badge) and job title, and to speak with a pharmacist, if requested.
- Be ensured of the confidentiality and privacy of all information contained within your records and of Protected Health Information (except as otherwise provided for by law or third-party payer contracts).
- Express concern, complaint or dissatisfaction about services provided (or failed to be provided).
- Express concern, complaint or dissatisfaction for lack of respect, treatment or service.
- Suggest changes in policy, staff or services without discrimination, restraint, reprisal, coercion or unreasonable interruption of services. Patients or caregivers can call (866) 979-8646 and ask to speak with a pharmacist or the pharmacy director.
- Be informed of any financial relationships of the pharmacy.
- Be advised of normal business hours, which are Monday through Friday, 9 a.m. to 5 p.m.
- Obtain the pharmacy phone number for normal business hours and after-hours care, which is (866) 979-8646.
- Decline participation, revoke consent or withdraw from any Rx To Go Pharmacy services at any time.

Patients have the responsibility to:

- Adhere to the plan of treatment or service established by your physician
- Submit any forms necessary to participate in the program, to the extent required by law
- Provide, to the best of your knowledge, accurate and complete medical and personal information necessary to plan and provide care/services
- Ask questions about your care, treatment and/or services and any unclear instructions provided by company representatives
- Use medications according to instructions provided, for the purpose it was prescribed and only for the individual to whom it was prescribed
- Communicate any inability to follow provided instructions
- Remain available to receive medication deliveries and coordinate with Rx To Go during times you will be unavailable
- Treat pharmacy personnel with respect and dignity without discrimination as to color, religion, sex, nationality or ethnic origin
- Promptly settle unpaid balances, except where contrary to federal or state law
- Notify pharmacy of change in prescription or insurance coverage
- Notify pharmacy immediately of address or telephone changes, whether temporary or permanent
- Notify healthcare provider of enrollment in the Patient Management Program, if applicable.

Please see the Notice of Privacy Practices at [FLCancer.com/Privacy-Policy](https://www.flcancer.com/Privacy-Policy).

Medicare Prescription Drug Coverage and Your Rights

Enrollee's Name: _____ (Optional)

Drug and Prescription Number: _____ (Optional)

Medicare Prescription Drug Coverage and Your Rights

Your Medicare rights

You **have the right to request a coverage determination** from your Medicare drug plan if you disagree with information provided by the pharmacy. You also **have the right to request a special type of coverage determination called an "exception"** if you believe:

- you need a drug that is not on your drug plan's list of covered drugs. The list of covered drugs is called a "formulary;"
- a coverage rule (such as prior authorization or a quantity limit) should not apply to you for medical reasons; or
- you need to take a non-preferred drug and you want the plan to cover the drug at a preferred drug price.

What you need to do

You or your prescriber can contact your Medicare drug plan to ask for a coverage determination by calling the plan's toll-free phone number on the back of your plan membership card, or by going to your plan's website. You or your prescriber can request an expedited (24 hour) decision if your health could be seriously harmed by waiting up to 72 hours for a decision. Be ready to tell your Medicare drug plan:

1. The name of the prescription drug that was not filled. Include the dose and strength, if known.
2. The name of the pharmacy that attempted to fill your prescription.
3. The date you attempted to fill your prescription.
4. If you ask for an exception, your prescriber will need to provide your drug plan with a statement explaining why you need the off-formulary or non-preferred drug or why a coverage rule should not apply to you.

Your Medicare drug plan will provide you with a written decision. If coverage is not approved, the plan's notice will explain why coverage was denied and how to request an appeal if you disagree with the plan's decision.

Refer to your plan materials or call 1-800-Medicare for more information.

PRA Disclosure Statement According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection is 0938-0975. The time required to complete this information collection is estimated to average 1 minute per response, including the time to review instructions, search existing data resources, and gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Baltimore, Maryland 21244-1850.

CMS does not discriminate in its programs and activities: To request this form in an accessible format (e.g., Braille, Large Print, Audio CD) contact your Medicare Drug Plan. If you need assistance contacting your plan, call: 1-800-MEDICARE.

Form CMS -10147

OMB Approval No. 0938-0975 (Expires: 02/28/2025)

Florida Medicaid Prescription Drug Coverage & Your Rights

Mail or fax completed Fair Hearing Request Form to:

Agency for Health Care Administration
 Medicaid Hearing Unit
 P.O. Box 60127
 Ft. Myers, FL 33906

(877) 254-1055 (toll-free)
 239-338-2642 (fax)

MedicaidHearingUnit@ahca.myflorida.com

Remember, you must contact your doctor (if prior authorization or pre-approval is required) AND the Ombudsman before requesting a hearing.

Incomplete Forms Will Be Returned And No Action Will Be Taken Until A Completed Form Is Received.

When can I NOT receive a fair hearing?

- If your prescription requires prior authorization and you have not contacted your doctor; OR
- Your doctor has not tried to get prior authorization; OR
- You came in too soon for a refill; OR
- The prescription has a problem that only the doctor can fix, and the doctor refuses to fix it.

If the pharmacist tells me Medicaid will not cover my prescription, when will I get a three (3) day supply of my medicine?

- If your prescription was to fill the exact prescription that Medicaid paid for last month; OR
- The pharmacist believes you should receive the medication to prevent serious or permanent harm to your health; OR
- The pharmacist believes that, if you do not receive your prescription, you could be hospitalized or need emergency treatment, or you have a serious contagious disease.

Note: The three (3) day supply can be repeated one time.

When is the three (3) day supply of refills not provided?

- If you already have the drug, or should still have some of your last prescription left; OR
- Your prescription may be harmful to your health; OR
- You are not a Medicaid recipient.

Can I keep getting my drug covered by Medicaid after the three (3) day supply is gone and the problem has not been fixed?

Yes, if you have asked for a fair hearing and asked for ongoing coverage of your prescription within ten (10) days after you get this pamphlet.

This coverage will continue until the Hearing Officer makes a decision about your request for a hearing.

3/10/17

Important Information

about your Florida Medicaid Prescription Drug Benefits



Dear _____
 (Pharmacist - Insert recipient's name)

Your pharmacist received a message from Medicaid or your Medicaid HMO that it will not cover your prescription for:

The reason given for not covering this prescription is:

This pamphlet has important information about:

- What you or your doctor must do to help you get medicine you need with your Medicaid.
- How to get help if your doctor cannot fix the problem.
- When you can request a fair hearing.
- When you can receive a three (3) day supply of your prescription.
- Where to call if you have questions not answered in this pamphlet.

Frequently Asked Questions and Answers

What should I do if my prescription needs "prior authorization" because it is not on the "Preferred Drug List" (PDL)?

Generally, you must first try the drugs that are on the PDL (this is called "step therapy"), unless there are special circumstances that your doctor can justify for using the non-PDL drug.

For drugs not on the PDL or that require "prior authorization" for other reasons - such as off-label use - you must first contact your doctor. Only your doctor or the doctor's staff can get prior authorization.

What if I need to fill my current medication, but it is no longer on the PDL or is not covered for some other reason?

Generally, you should get at least a three (3) day supply of your current medication from the pharmacist, and you should contact your doctor right away. If your pharmacist is unable to assist you, contact your Ombudsman at the number below to see if you qualify for a three (3) day supply of your current medication.

What if I cannot get my medicine for another reason? What if the pharmacist cannot fix the problem?

You MUST contact the Ombudsman's Office at 1-866-490-1901 (TOLL FREE).

What is the Ombudsman's Office?

Medicaid (and each Medicaid HMO) has an office to help fix certain prescription coverage problems. The name of the office is the "Ombudsman".

What if the Ombudsman does not fix the problem and Medicaid or the HMO still does not cover my medicine?

You may be able to request a fair hearing if the Ombudsman cannot fix the problem.

What are examples of when I can have a fair hearing?

- If you have made reasonable efforts to fix the problem; AND
- You have contacted the Ombudsman and they do not fix the problem within three (3) business days; AND
- You think Medicaid's reason for not covering the drug is wrong; OR
- The reason for not covering the drug is "lack of prior authorization", and you can verify that your doctor tried to get prior authorization. This information is available either through your physician's office or the Ombudsman office.

(continued)

Fair Hearing Request Form

Do not request a hearing unless you have contacted your doctor and the Ombudsman as described in this pamphlet.

- (1) On _____ (Date) Medicaid refused to pay for my drug _____ (Name of Drug) because _____ and I believe that reason is wrong.
 (Insert reason written on pamphlet or attach the pharmacy printout, if you were given one by your pharmacist.)

- (2) I want ongoing coverage of the prescription until my appeal is decided, since this is a request for coverage of a medication I am currently taking and I am appealing within 10 days of getting this pamphlet. Yes No

Circle the # of the paragraph(s) below that applies to you:

- (3) If the reason in (1) is "no prior authorization", I want a hearing, (a) because my doctor tried to get prior authorization and could not, or (b) because the drug I need does not require prior authorization. I verified my physician's request for prior authorization with (check one) my physician or the Ombudsman's office.

- (4) If the reason in (1) is "too early", I request a hearing because that is wrong. I last filled this prescription on _____.

- (5) I request a hearing, because I contacted the Ombudsman and gave them all the information they asked for to fix my rejection, and they could not do so, or would not help me, or would not answer my calls.

I assert, under penalty of perjury, this _____ day of _____, 200____, that the foregoing is true and correct.

Recipient - Sign Name _____

Requestor - (If Not Recipient) Sign Name _____

Recipient's Medicaid ID Number _____

Requestor - (Relationship to Recipient) _____

I understand that I can represent myself or use legal counsel, a relative, friend or spokesperson in the hearing.

How can we contact you about your request for a hearing?

Name: _____
 Print your name

Mailing Address: _____
 Street address

City _____ Zip Code _____

Phone number where we can contact you: _____
 Area Code and Number

See Reverse Side for Mailing Instructions

If you have followed the steps outlined in this pamphlet, and you believe you are entitled to a hearing, you or your representative must fill out this form and mail or fax it to the address shown on the back. Be sure to include all the information requested and circle the paragraph(s) that explains the reason you are requesting a hearing.

Remember to enter your Medicaid ID# and print and sign your name.

Florida Medicaid Patients: This notice provides you information on your rights as a plan enrollee with regard to prior authorization coverage determinations, including exception requests.

Your Satisfaction is Key

We strive to provide our patients with the highest quality of service and care. To monitor our performance, we periodically survey our patients by telephone. Please notify us by telephone or in writing if you do not wish to be contacted.

If you are not satisfied with any aspect of your experience with Rx To Go, we want to know about it.

You may contact us by telephone at **(239) 275-5357** or **(866) 979-8646** (toll free), or contact us by U.S. mail:

Rx To Go

Attn: Pharmacy Director
14543 Global Pkwy., Suite 100
Fort Myers, FL 33913

When contacting us, please provide your name, date of birth and a specific description of the date, time, people involved, etc.

If you feel the need to discuss your concerns or complaints with a party other than Rx To Go pharmacy staff, contact any of the following:

- Florida Department of Health Complaints division at **(850) 245-4339**.
- URAC Accreditation at **(202) 326-3941**.
- Accreditation Commission for Health Care (ACHC) at **(855) 937-2242** or **(919) 785-1214** and request the *Complaints Department*.
- National Association of Boards of Pharmacy (NABP) at **(847) 931-4406**

Florida Board of Pharmacy

You may submit your complaint electronically through the Board's on-line complaint form located on the Florida Department of Health website:

FloridaHealth.gov/Licensing-and-Regulation/Enforcement/Index.html



We value your feedback.

In the future, you may be selected to complete a satisfaction survey. If, at any time, you wish to share any feedback about Rx To Go or want to learn more, contact us or visit our website: FLCancer.com/RxToGo.

Phone: (239) 275-5357
or (866) 979-8646

Hours: M–F: 9 a.m.–5 p.m. (EST)
Sa: 9 a.m.–1 p.m. (EST)

On-Call Service

We offer 24/7 pharmacist support for any after-hours clinical questions. Call us at (866) 979-8646. You will be directed to a live operator and a pharmacist will return your call within 30 minutes.

To learn more about Rx To Go, LLC and download a digital version of this packet, please visit: FLCancer.com/RxToGo

Rx To Go Pharmacy is proud to be NABP certified and accredited with URAC, ACHC and NCODA.

These achievements display Rx To Go Pharmacy's unwavering commitment to adhere to high standards and provide exemplary health care to our patients.

